Example EDI ASC X12N 005010X223A2 (837 Health Care Claim: Institutional, Addenda A2)

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□□□□□*120816*1144*^*00501*00000031*1*P*:~
02: GS*HC*ENH9999*80881*20120816*1144*31*X*005010X223A2~
03: ST*837*0034*005010X223A2~
04: BHT*0019*00*3920394930203*20120814*1615*CH~
05: NM1*41*2*HAPPY HEALTH PLAN****46*ENH9999~
                                                      Loop 1000A: Submitter Name
06: PER*IC*JANE DOE*TE*5555552222~
07: NM1*40*2*EDSCMS****46*80881~
                                                      Loop 1000B: Receiver Name
08: HL*1**20*1~
                                                      Hierarchical Loop 2000A: Billing Provider
09: NM1*85*2*MERCY HOSPITAL****XX*1299999999~
10: N3*876 MERCY DRIVE~
                                                         Loop 2010AA: Billing Provider Name
11: N4*NORFOLK*VA*235089999~
12: REF*EI*344232321~
                                                      Hierarchical Loop 2000B: Subscriber
13: PER*IC*BETTY SMITH*TE*9195551111~
14: HL*2*1*22*0~
15: | SBR*S*18*XYZ1234567******MA~
                                                      Loop 2010BA: Subscriber Name
16: NM1*IL*1*DOUGH*MARY****MI*672148306~
17: N3*1234 STATE DRIVE~
18: N4*NORFOLK*VA*235099999~
19: DMG*D8*19390807*F~
20: NM1*PR*2*EDSCMS****PI*80881~
                                                      Loop 2010BB: Payee Name
21: N3*7500 SECURITY BLVD~
22: N4*BALTIMORE*MD*212441850
23: REF*2U*H9999~
24: CLM*22350578967509876984536578798A*200.00***11:A:1**A*Y*Y~
25: DTP*096*TM*0958~
26: DTP*434*RD8*20120330-20120331~
                                                      Loop 2300: Claim Information.
27: DTP*435*D8*20120330~
                                                      This loop "floats." In this example it's
28: CL1*2*9*01~
                                                      under Subscriber because Subscriber is
29: HI*BK:4280~
                                                      also the Patient (patient hierarchical loop
30: HI*BJ:4280~
                                                      is omitted).
31: HI*BF:25000~
32: HI*BR:3121:D8:20120330~
33: | HI*BH:41:D8:20110501*BH:27:D8:20110715*BH:33:D8:20110718*BH:C2:D8:20110729~
34: HI*BE:30:::20~
35: HI*BG:01~
36: NM1*71*1*JONES*AMANDA*AL***XX*1005554104~
                                                      Loop 2310A: Attending Provider Name.
37: SBR*P*18*XYZ1234567*****16~
                                                      A,B,C,D,F determined by NMO1: 71 => A.
38: AMT*D*200.00~
                                                      Loop 2320: Other Subscriber Information
39: OI***Y***Y~
40: NM1*IL*1*DOUGH*MARY****MI*672148306~
                                                        Loop 2330A: Other Subscriber Name
41: N3*1234 STATE DRIVE~
42: N4*NORFOLK*VA*235099999~
43: | NM1*PR*2*HAPPY HEALTH PLAN****XV*H9999~
                                                        Loop 2330B: Other Payer Name
44: N3*705 E HUGH ST~
45: N4*NORFOLK*VA*235049999~
46: REF*T4*Y~
47: LX*1~
                                                     Loop 2400: Service Line Number
48: | SV2*0300*HC:81099*200.00*UN*1~
49: DTP*472*D8*20120330~
50: SVD*H9999*200.00*HC:81099*0300*1~
                                                        Loop 2430: Line Adjudication Info
51: DTP*573*D8*20120401~
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52: SE*50*0034~

53: GE*1*31~

54: IEA*1*00000031~

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"File" (Communications Envelope)
   ISA-IEA (Interchange Control Envelope)
     GS-GE (Function Group Envelope)
        ST-SE (Transaction Set Envelope)
          LOOP ID - 1000A SUBMITTER NAME
          LOOP ID - 1000B RECEIVER NAME
          LOOP ID - 2000A BILLING PROVIDER HIERARCHICAL LEVEL (R, 1+)
            Loop ID - 2010AA Billing Provider Name
            Loop ID - 2010AB Pay-To Address Name
            Loop ID - 2010AC Pay-To Plan Name
            Loop ID - 2000B SUBSCRIBER HIERARCHICAL LEVEL (R, 1+)
               Loop ID - 2010BA Subscriber Name
               Loop ID - 2010BB Payer Name
               Loop ID - 2000C PATIENT HIERARCHICAL LEVEL (S, 1+)
                 Loop ID - 2010CA Patient Name (R, 1)
                 Loop ID - 2300 Claim Information (R, 100)
                   Loop ID - 2310A Attending Provider Name (S, 1)
                   Loop ID - 2310B Operating Physician Name (S, 1)
                   Loop ID - 2310C Other Operating Name (S, 1)
                   Loop ID - 2310D Rendering Provider Name (S, 1)
                   Loop ID - 2310E Service Facility Name (S, 1)
                   Loop ID - 2310F Referring Provider Name (S, 1)
                   Loop ID - 2320 Other Subscriber Information (S, 1)
                      Loop ID - 2330A Other Subscriber Name (R, 1)
                      Loop ID - 2330B Other Payer Name (R, 1)
                      Loop ID - 2330C Other Payer Attending Provider (S, 1)
                      Loop ID - 2330D Other Payer Operating Physician (S, 1)
                      Loop ID - 2330E Other Payer Other Operating Physician (S, 1)
                      Loop ID - 2330F Other Payer Service Facility Location (S, 1)
                      Loop ID - 2330G Other Payer Rendering Provider Name (S, 1)
                      Loop ID - 2330H Other Payer Referring Provider Name (S, 1)
                      Loop ID - 2330I Other Payer Billing Provider (S, 1)
                    Loop ID - 2400 Service Line Number (R, 999)
                      Loop ID - 2410 Drug Identification (S, 1)
                      Loop ID - 2420A Operating Physician Name (S, 1)
                      Loop ID - 2420B Other Operating Physician Name (S, 1)
                      Loop ID - 2420C Rendering Provider Name (S, 1)
                      Loop ID - 2420D Referring Provider Name (S, 1)
                      Loop ID - 2430 Line Adjudication Information (S, 15)
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